| Please type a plus sign (+) inside this box + Under the Paperwork Reduction Act of 1995, no a valid OMB control number. | persons | Patent and Trademark Office | 8: U.S. I | rough 9/30/00. OMB | MMFRCE . | |
|----------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------|-----------------------------|------------|--------------------|----------|--|
| | | Attorney Docket Nun | nber | P214021 | | |
| DECLARATION FOR UTILITY DESIGN | First Named Inventor | • | DAVID W. I | BROWN | | |
| PATENT APPLICATION | COMPLETE IF KNOWN | | | | | |
| (37 CFR 1.63) | Application Number | pplication Number | | | | |
| | Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required) | Filing Date | | | | |
| Submitted OR Submitted after | | Group Art Unit | | | | |
| Filing (37 CFR 1.16 (6 | | Examiner Name | | | .) | |
| EXPRES | S MA | IL LABEL NO.: EV | 7 044 | 1299787 US | | |

| EXPRESS MAIL LABEL NO.: EV 044299787 05 | | | | | | | | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------|-------------------------------------|---------------------------------------------------------------------------------------------------------------|---------------------------------|--|--|--|--|--|
| As a below named inventor, I hereby declare that: | | | | | | | | | |
| My residence, post office address, and citizenship are as stated below next to my name. | | | | | | | | | |
| I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: | | | | | | | | | |
| SYSTEMS AND METHODS FOR TRANSMITTING MOTION CONTROL DATA | | | | | | | | | |
| the specification of which (Title of the Invention) is attached hereto | | | | | | | | | |
| OR was filed on (MM/DD/YYYY) as United States Application Number or PCT International | | | | | | | | | |
| Application Number | Application Number and was amended on (MM/DD/YYYY) (if applicable). | | | | | | | | |
| I herepy state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56. | | | | | | | | | |
| I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed. | | | | | | | | | |
| Prior Foreign Application Number(s) | Country | Foreign Filing Date (MM/DD/YYYY) | Priority Not Claimed | Certified Copy Attached? YES NO | | | | | |
| | | | 0000 | 0000 | | | | | |
| Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto: | | | | | | | | | |
| I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below. | | | | | | | | | |
| Application Number(s) | | | 1 | | | | | | |
| 60/260,061 | 01/04/200 |)1 | onal provisional application ers are listed on a emental priority data sheet SB/02B attached hereto. | | | | | | |

[Page 1 of 2]
Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

| | + | |
|---|-----|--|
| _ | T 1 | |

DECLARATION — Utility or Design Patent Application

| I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application. | | | | | | | | | | | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|--------------------|----------|-------------|----------------|-------------------------|------------------|-----------------|-----------|--------------|--------------------------|------------|
| U | J.S. Pa | rent Applica | | r PC7 | ſ Parer | ıt | | | iling Date | , | Par | ent Patent | |
| <u> </u> | | Num | iber | — | | | (MI) | /DL | D/YYYY) | +- | | (if applica | ble) |
| | | | | | | 1 | | | | | | | |
| | | | | | | | | | | 1 | | | |
| | | • | | | | 1 | | | | | | | |
| | | | | | | | | | | | | | |
| ☐ Additiona | i U.S. or | PCT internation | al applica | ation ni | umbers a | re listed on | a supplem | enta | I priority date | sheet P | TO/SB/ | 02B attached | hereto. |
| As a named in | ventor, I | hereby appoint to connected therew | he follow | | | |) to prose | cute | this applicati | ion and t | o transa | | |
| anu Hautmen | K Umos - | Olineara | | OR | omer Num | \ | | | | | | Place Cust Number Bai | r Code |
| | | | بقا | Regis | | trationer(s) : | name/regi | strati | ion number li | | ow L | <i>l ahel he</i> Regi | stration |
| | Nam | 10 | | ┼ | | nber | - - | . | Nan | ne | | | ımber |
| | - 0 | 1 abb | | ١, | ~ ==0 | | | , | | | | | |
| Michael | R. 3 | chacht | | ا ا | 3,550 | | | | | | | | : |
| | | | | <u> </u> | | | 11.4 | | | | | | • |
| | | d practitioner(s) | | • | | Registered | Practition | er Int | formation sh | eet PTO | /SB/020 | attached here | ito. |
| Direct all corr | respond | | Custom or Bar (| | | | | | OR | X C | orrespo | ondence add | ress below |
| Name | MIC | CHAEL R. | SCHAC | CHT | | | | | ···· | | | | |
| Address | 280 | 1 Meridi | an St | ree | t | | | | | | | | |
| Address | Sui | te 202 | | | | | | | | <u></u> | | | |
| City | BEI | LINGHAM | | | | | State WA ZIP 98225-2412 | | | | | | |
| Country | USA | | | T | elephon | e 360- | 647-0 | 400 |) | Fax | 360 | -647-041 | .2 |
| i hereby declar believed to be | I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. | | | | | | | | | | s made are i | | |
| | | irst Invento | | | | <u> </u> | A pe | tition | has been | filed for | r this u | nsigned inve | ntor |
| Giv | ven Nan | ne (first and m | iddle [if | anyi) | | | Family Name or Surname | | | | | | |
| DA | VID W | J | | | | | BRC | NW | | | | | |
| Inventor's Signature | | | | | | | 1 | | | | | Date | |
| Residence: C | sidence: City Bingen State WA | | | | WA | Count | ry | U.S. | | | Citizenship | U.S. | |
| | | 154 E. I | Ringe | n Po | oint ' | Way. St | nite F | 2 | | | | | |
| Post Office Ad | idress | 7.74 1.0 | DIIIGO | 11 1 | 71110 | way, be | 4100 . | | | | | | |
| Post Office Ad | ddress | | | | | | 1 | | | , | | | |
| City Bing | en | State WA ZIP | | | | | 98605 Country U.S. | | | | | | |
| A statistics of the | iousstat | s are being na | med or | n the | SILL | niemental | Addition | al In | ventor(s) s | theet/c) | PTO/S | D (OOA ettee | had hereto |